

Centering Students' Voices on School Counseling Support

A research brief developed as part of work conducted in adapting a mindfulness-based social-emotional learning program for middle school counselors called [Be CALM](#)

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Introduction

Even before the COVID-19 pandemic, youth mental health challenges were rising. The pandemic exacerbated these issues, as 40% of youth reported feeling persistent sadness or hopelessness that affected their daily activities in 2021¹. Given that nearly all U.S. youth spend a significant part of their day in school environments that shape their mental, social, and emotional development, schools play a crucial role in providing the necessary support and resources to improve mental health². In response to the growing mental health crisis, the federal government provided billions of dollars in post-pandemic funding to increase school-based mental health services³. Although this funding has enabled schools across the country to expand mental health services, it remains unclear whether these services meet adolescents' wants and needs.

In this brief, we present findings from focus group discussions with middle school students about their thoughts and experiences with school-based mental health counseling. We highlight students' perceptions of the barriers and motivations for participating in school counseling and make recommendations for how schools can strengthen these services.

Background

Nearly one-third of adolescents who receive mental health services do so exclusively within educational settings⁴. Despite this availability, many adolescents may not use services due to barriers to seeking support. The top three barriers reported among adolescents aged 11-14 years olds are related to mental illness stigma, reluctance to talk about symptoms, and lack of trust in the sources of support^{5,6}. These barriers may be compounded by virtual learning and social distancing during the pandemic, which not only impacted individuals' mental health but also disrupted critical social interactions and skill development opportunities. School closures during the pandemic limited students' opportunities to interact and build relationships with peers and school staff. Students in their formative early adolescent years missed out on practicing key social-emotional skills such as stress management⁷⁻⁹. Institutional barriers have also made it increasingly challenging for counselors to build strong relationships with students due to high caseloads and administrative duties that take time away from counseling responsibilities¹⁰. Therefore, lack of connection and belonging at school has contributed to growing concerns about adolescent mental health, including a marked increase in depressive symptoms and suicidal behaviors^{1,11}.

Students' diminished feelings of belonging at school may have exacerbated reluctance to talk about their emotional struggles and willingness to seek support ^{5,11}. A lack of trust may further contribute to stigma and misinformation experienced by adolescents ⁶. To reduce these barriers and enhance students' participation in school-based mental health services, it is important to further understand students' concerns in seeking support.

Mental Health Disparities among Racial/Ethnic Minority Students

The COVID-19 pandemic not only highlighted existing racial disparities in healthcare access but also brought attention to systemic racial discrimination manifested in incidents of police brutality faced by Black communities. At the same time, Black youth reported spending more time on social media platforms and experienced higher exposure to online racial discrimination compared to their peers from other racial/ethnic groups ¹², which has been linked to negative mental health outcomes. These findings suggest that Black youth have experienced increased exposure to stress and adversity, which may increase mental health difficulties.

Although school-based services have the potential to decrease mental health inequities, students from racialized cultures may face additional barriers when working with their school counselors ¹³. Notably, the majority of school counselors are White females, while the composition of the K-12 public school population has become increasingly diverse over time ^{14,15}. White students now represent less than half of K-12 public school enrollment, while Black and Hispanic students represent the next largest groups of those enrolled ¹⁵. Despite students of color now being in the majority of public school enrollment, Black and Hispanic students reported the lowest rates of school connectedness (54% and 58%, respectively), compared to an average of 61% among other racial and ethnic groups ¹.

A large body of literature shows that Black youth consistently feel less supported and connected at school than their White peers ¹⁶⁻¹⁸. This is concerning because students from marginalized backgrounds are exposed to higher rates of adversity like racial-ethnic discrimination, which can increase rates of mental health difficulties and adverse behavioral consequences ^{19,20}.

Applying the AAAQ Framework to School Mental Health Services

The Availability, Access, Acceptance, and Quality Framework was developed by the Economic, Social, and Cultural Rights Committee ²¹ to encompass the four key elements of the fundamental right to health. Its purpose is to guide recommendations for national governments on conditions in which everyone receives the highest attainable standard of health without distinction of race, religion, political belief, economic, or social condition. Although, to our knowledge, the AAAQ Framework has not previously been applied to school-based mental health services, it provides a valuable perspective for understanding students' perceived barriers to accessing school counseling and how such services might be enhanced to optimize utilization.

As seen in **Figure 1**, we adapted the language of the AAAQ criteria to fit the context of assessing school-based mental health services.



Figure 1. AAAQ Framework

Focus Group Discussions with Stressed Middle Schoolers

Data were collected from 36 students with parent permission from 4 rural North Carolina (NC) middle schools across 7 focus groups (Figures 2a, 2b, 2c). Participating schools partnered with the University of North Carolina at Chapel Hill to support the development of a mindfulness-based school counseling group for stress management. Students were referred by their school counselor or a teacher who identified them as experiencing stress that warranted support.

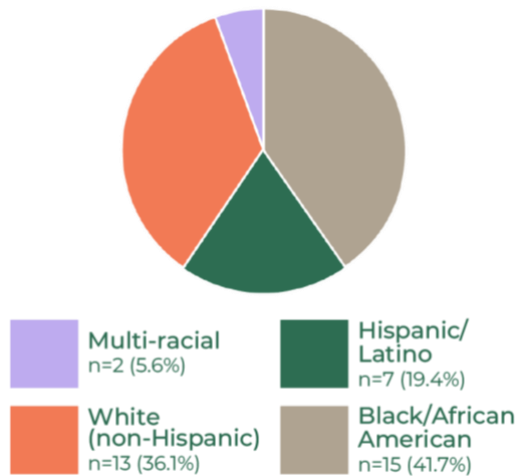


Figure 2a. Self-identified race and ethnicity of students.
*Multiracial student also identified as Hispanic/Latino

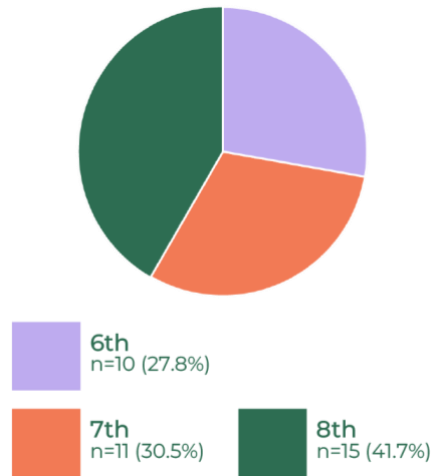


Figure 2b. Grades of students.

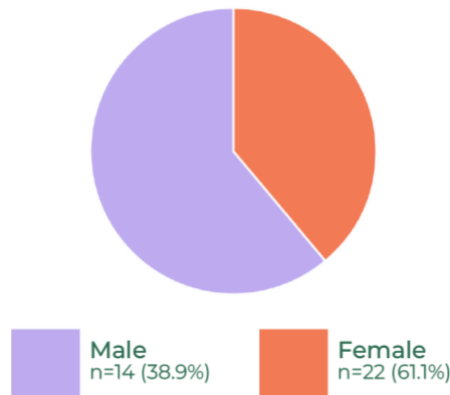


Figure 2c. Self-identified gender of students.

Methodology

Each focus group was comprised of 4-7 middle school students. Focus group discussions were conducted during the school day and lasted approximately 45 minutes. They were facilitated by a moderator and assistant who followed a semi-structured discussion guide, which ensured that all groups were asked the same core questions but allowed for prompts and probes as relevant to each group. Students were asked to discuss their stress experiences and barriers and facilitators to participating in school-based group counseling. All discussions were digitally recorded and transcribed for coding.

The research team developed a codebook based on the focus group guide, and refined codes based upon application to the transcripts, incorporating the AAAQ framework. Specific codes were examined in relation to the AAAQ Framework: 1) *Social and Interpersonal Challenges for Middle School Students Seeking Counseling*, 2) *Internal Challenges for Middle School Students Seeking Counseling*, 3) *Internal Reasons Middle School Students May Try New Things*, 4) *External Reasons Middle School Students May Try New Things*, 5) *Motivators for Middle School Students to Participate in a Counseling Group*, and 6) *Characteristics of a Good Counselor for Middle School Students*.

Findings

Based on the coding, we identified how many focus groups discussed each type of barrier relating to the AAAQ framework. As illustrated in **Figure 4**, issues regarding students' acceptance of services or perceptions of the quality of services were discussed consistently across all or almost all focus groups.

What Barriers Did Students Identify in Seeking School Counseling?

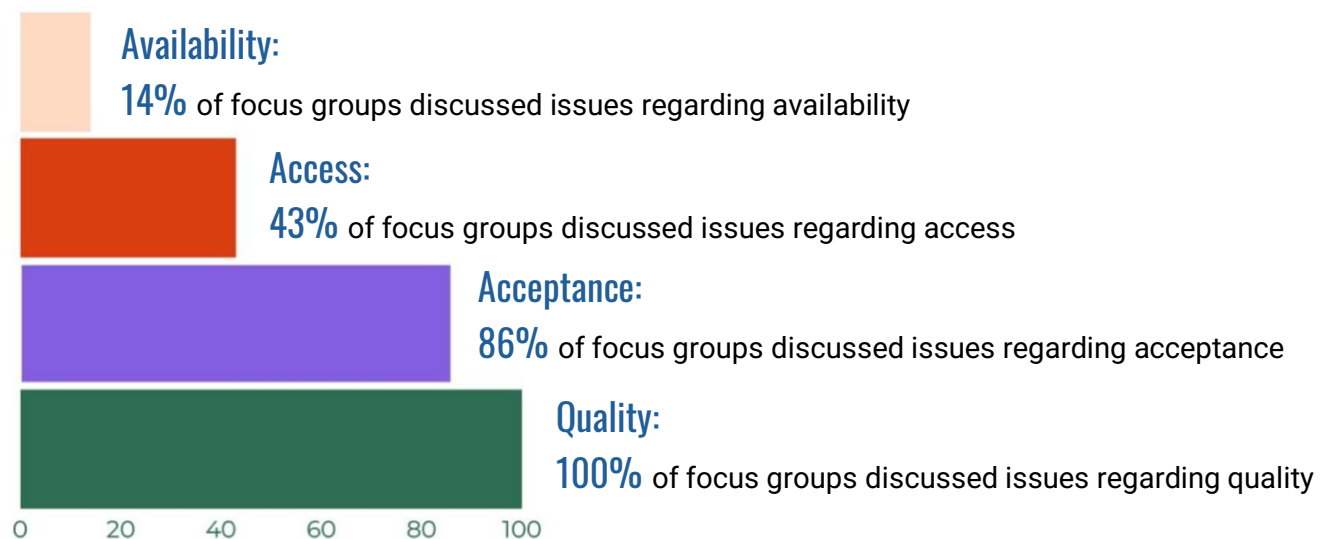


Figure 4. Frequency of issues discussed in focus groups.

Availability. This was the least frequent barrier to school mental health services assessed, with only 1 of 7 groups (14%) mentioning a concern, and that concern was related to teachers rather than school counselors. This low level of concern about availability is understandable given that all the schools in our sample had one or more school counselors.

Access. Students in 3 of the 7 groups (43%) discussed reasons why middle schoolers might not want to see a counselor even if one was available at their school. Barriers and challenges related to accessing school counseling included being given teacher permission to leave class to see the counselor and having to complete a referral form. For example:

"If somebody's not allowing them to go to the counselor. I mean, say how there's a referral form that you can fill out. Sometimes the teachers will not fill one out at that time because they're doing instructional learning time, and then you forget about it."

"Maybe they think the teacher might not let them go. We've been havin' a lot of substitutes. Maybe they think the substitute won't let them go."

Acceptance. Students discussed their concerns about utilizing school counseling services in 6 of the 7 groups (86%). They described concerns that reflect social stigma surrounding mental health and fear of judgment. The belief that they should be able to 'deal with' their own problems was also expressed:

"A lot of people think it's weird to go to a school counselor. They think of it as embarrassing, so they don't really go."

"What if the counselor's homophobic? Or if they have an opinion on somebody, it can be really hard."

"It's my problem. Let me deal with it."

Quality (as perceived by students). Students in all 7 groups shared concerns about the quality of school counseling services, defined as trusting in confidentiality and being understood:

"It's really the issue of understanding. You're an adult. I'm a child. You may not understand my perspective. Or if I have a problem with another teacher, since you're an adult and just the way the conversation is heading, I'd assume you're on the adult side. You're not going to listen to a child."

"They can also share things with other people. I know that they're not allowed to do that, but it still is happening."

"Maybe it's not the counselor in general. Maybe it's just being in the office, and people can hear you. You're just scared that those people are gonna talk about it to your personal family members or friends."

What Would Motivate Students to Seek School Counseling?

Key themes that suggest ways to enhance middle schoolers' acceptance and perceived quality of school counseling services include:

Enhance Acceptance by Reducing Stigma. Students explained that they would be more likely to try group counseling if they knew it could help them, heard positive things about it, or if they knew other students participating in it.

"If they know it's something that a lot of people use, they might be like, okay, it's normal, and then they use it as a way to help."

"I feel like just being with your friends in general. I feel like just being with your friends would really help you just wanna go."

Enhance Perceived Quality by Building Trust. When asked about the qualities of a school counselor who they would want to seek support from, students described relatability and someone they can trust to protect their privacy.

“If they did go through the same thing as you, they could say that they had—they went through the same thing and they got over it.”

“Reassuring them none of their business will get out, and if there’s anything personal you wanna talk about, just talk to them by yourself. Make them feel like it’s just all y’all in it together.”

Conclusion

As seen in the findings presented in this brief, there is more to enhancing mental health services in schools than increasing funding and staffing of school mental health counselors. Students’ concerns related to the Acceptance and Quality of school counseling appear to reflect broader mental health stigma as well as lack of trust, particularly regarding confidentiality of sensitive information.

Conversations from student focus groups validate existing literature about how these concerns are common barriers to adolescents’ help-seeking behaviors with mental health professionals^{6,13}. Furthermore, these barriers have been identified in broader contexts but are now validated in the context of middle school counseling with a sample that is predominantly students of color (African American and Hispanic).

In addition to these barriers, opportunities were also identified for ways that schools may be able to increase middle schoolers’ acceptance of school counseling services. By understanding what motivates middle schoolers, school counselors can tailor counseling sessions and provide the necessary support and resources to help students feel comfortable and enhance engagement. It also appears critical to build trust and work to reduce the perceived stigma and misunderstanding that youth may experience about school counseling.

In conclusion, the AAAQ framework sheds light on the importance of centering youth’s voices to increase their acceptability of school counseling²¹. Given the alignment of our findings with the broader literature, we believe there are important implications of this work. However, we acknowledge that our small sample size is not representative of middle school enrollment across the country. Although our student sample was racially and ethnically diverse, our focus group design did not allow us to examine how perceived barriers and facilitators may differ by race and ethnicity, and is an important area for future research.

Implications for School Mental Health Services

Based on the present research, three key strategies for increasing school counseling acceptability for middle school students are recommended: reducing stigma, promoting trust between counselors and students, and utilizing counseling strategies that are culturally responsive to the needs of students with diverse backgrounds and identities.

(1) Promote Mental Health Literacy. To reduce the stigma surrounding mental health for early adolescents, schools should promote mental health literacy through curricula or peer modeling programs. Research shows that students who engaged in a mental health literacy curriculum experienced reduced stigma, had fewer worries about sharing information with a mental health professional, and exhibited higher help-seeking behaviors²²⁻²⁴. Peer-led modeling programs have also been shown to improve acceptance of mental health services and support from adults²⁵, such as school counselors. Peer-led modeling programs involve training adolescents as peer leaders who share stories about their mental health challenges and experiences seeking support²⁵. These types of approaches may also promote increased utilization of school counseling services.

(2) Promote School Connectedness and Trust. Another effective way to foster trust between students and counselors is by promoting school connectedness²⁶. Counselors can build a sense of connection by forming relationships with students beyond the counseling office by having a presence in different school contexts such as the cafeteria, recess, and extracurricular activities like sports games or other events. Counselors can also address students' concerns regarding trust by being honest and transparent about the state policies they are required to follow that may limit confidentiality in school counseling sessions. Additionally, counselors should create confidential physical spaces for counseling sessions to reassure students about the protection of their privacy. Understanding the extent of students' concerns about confidentiality and how this may prevent needed treatments may be useful for school policymakers.

(3) Ensure Culturally Responsive Counseling Practices. Lastly, school counselors who listen to and validate students' experiences and perspectives and are open to feedback are likely to provide counseling that students experience as high quality. To do this with students of color who may have very different cultural backgrounds from them, school counselors will likely need more training than the pre-service experiences recommended by the American Counseling Association to better integrate theory into practice²⁷. One approach for helping counselors attune to students is through mindfulness, which builds skills for interacting in a kind and curious manner and which may reduce implicit bias²⁸. Mindfulness programs provided for whole schools have also been shown to promote connections and a positive school climate^{29,30}.

For further information on this research or the Be CALM program, please contact desiree.murray@unc.edu.

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